

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **MAE SMITH**

Name

(2) **951 NW 33rd WAY**

Address (number and street)

LAUDERHILL, FLORIDA 33311

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

RECEIVED

AUG 10 2017

CITY CLERK'S OFFICE

(4) Check appropriate box(es):

☒ Candidate Office Sought: **CITY OF LAUDERHILL COMMISSION SEAT 2**

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From **07 / 01 / 17** To **07 / 31 / 17** Report Type: **M7**

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , **75** . **00**

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , **75** . **00**

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , **65** . **33**

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , **65** . **33**

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , **476** . **01**

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , **327** . **89**

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) **LIVIA HORNE**

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X *Livia Horne*

Signature

(Type name) **MAE SMITH**

☒ Candidate ☐ Chairperson (only for PC and PTY)

X *Mae Smith*

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name MAE SMITH (2) I.D. Number _____

(3) Cover Period 07 / 01 / 17 through 07 / 31 / 17 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
07 / 09 / 17 006	JANA DAVIS 3870 NW 7th COURT LAUDERHILL, FLORIDA 33311	I		CHE			50.00
07 / 13 / 17 007	MYRTLE OBAN 3380 NW 7th STREET FORT LAUDERDALE, FL 33311	I		CHE			25.00
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name MAE SMITH

(2) I.D. Number _____

(3) Cover Period 07 / 01 / 17 through 07 / 31 / 17

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
07 / 03 / 17	GOOGLE INC. 1600 AMPHITHEATRE MOUNTAIN VIEW, CA 94043	FEES	CHE		2.33
006					
07 / 17 / 17	TIFFANY 1556 EAST COMMERCIAL BLVD FORT LAUDERDALE, FL 33334	ADVERTISEMENT	CHE		53.00
007					
07 / 31 / 17	TD BANK 1701 ROUTE 70 EAST CERRY HILL, NJ 08034	FEES	CHE		10.00
008					
/ /					
/ /					
/ /					
/ /					
/ /					